

## **Application Data Sheet**

### **Application Information**

Application number::  
Filing Date:: 02/23/2004  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit:: 3739  
Title:: CRYOSURGICAL FLUID SUPPLY  
Attorney Docket Number:: 018468-000650US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure:: 3A-3C  
Total Drawing Sheets:: 4  
Small Entity?:: Yes  
Petition included?:: No  
Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: James  
Family Name:: Joye  
City of Residence:: Monte Sereno  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 16175 Andrews Court  
City of Mailing Address:: Monte Sereno  
State or Province of mailing address:: CA  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 95030

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Richard  
Middle Name:: S.  
Family Name:: Williams  
City of Residence:: Redwood City  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 611 Topaz Street, #2  
City of Mailing Address:: Redwood City  
State or Province of mailing address:: CA  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 94061

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Ronald  
Family Name:: Williams  
City of Residence:: Menlo Park  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 149 Campo Bello Lane  
City of Mailing Address:: Menlo Park  
State or Province of mailing address:: CA  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 94025

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	10/105,577	03/21/02
	Continuation of	09/268,205	03/15/99

### **Foreign Priority Information**

Country::	Application number::	Filing Date::
PCT	US00/06744	14 March 2000

### **Assignee Information**

Assignee Name::	CryoVascular Systems, Inc.
Street of mailing address::	160 Knowles Drive
City of mailing address::	Los Gatos
State or Province of mailing address::	California
Country of mailing address::	USA
Postal or Zip Code of mailing address::	95032